



Registration number \_\_\_\_/\_\_\_\_.\_\_\_\_.

**REQUEST FOR AN AUDIENCE**

**Doctoral School Director**

The undersigned..... as PhD Student enrolled on (date) ..... /..... /....., form budget / tax, in the University Doctoral Domain:  Medicine,  Dental Medicine, Pharmacy in UMF „Carol Davila” in Bucharest, under the scientific coordination of Prof./Associate Prof. ...., would kindly like to ask you to accept **my request for an audience.**

The reason I address this request for an audience is:.....

**Signature,**

**PhD Student**

.....

PHONE NUMBER: .....

**To the Director of the Doctoral School**